

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

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95 APR 26 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 763604 (6)
1. Corporation Name
NATIONAL CHURCH RESIDENCES OF JACKSONVILLE, FLORIDA, INC.

Principal Place of Business Mailing Address
3333 PRITMORE RD JACKSONVILLE FL 32257 US
2335 N. BANK DR. COLUMBUS OH 43220 US

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 28 Zip 30 Country

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/08/1982 3a. Date of Last Report 04/27/1994

4. FEI Number 31-1046830 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
MEZIE, LOU
3015 SPINKS ROAD
SEBRING FL 33870

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning.)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	SLEMMER, THOMAS W.
STREET ADDRESS	2335 N BANK DRIVE
CITY-ST-ZIP	COLUMBUS, OH 00000
TITLE	D
NAME	PRICE, VIRGINIA
STREET ADDRESS	2335 N BANK DRIVE.
CITY-ST-ZIP	COLUMBUS OH
TITLE	VP
NAME	MILLER, ROBERT C.
STREET ADDRESS	2335 N BANK DR.
CITY-ST-ZIP	COLUMBUS, OH 00000
TITLE	D
NAME	BLAINE, WILLIAM E JR
STREET ADDRESS	2335 N BANK DR
CITY-ST-ZIP	COLUMBUS, OH 00000
TITLE	D
NAME	JONES, JOHN
STREET ADDRESS	2335 N BANK DR.
CITY-ST-ZIP	COLUMBUS, OH 00000
TITLE	ST
NAME	KASBERG, JOSEPH R.
STREET ADDRESS	2335 N BANK DR.
CITY-ST-ZIP	COLUMBUS, OH 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *Joseph R. Kasberg* 4/15/95 6M 451 2151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 JOSEPH R. KASBERG